Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) IBERTARIAN PARTY OF COLORADO 11757 W KEN CARYL AVE ADDRESS (number and street) F124 (Check if address is changed) LITTLETON 80127-3719 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS TREASURER@LPCOLORADO.ORG (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.lpcolorado.org (Check if address is changed) DATE 2016 C00623397 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. John C Hjersman Type or Print Name of Treasurer John C Hjersman [Electronically Filed] 80 10 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

| FEC Form 1 (Revised 02/2009) | Page 2 | | | | |
|--|--|--|--|--|--|
| TYPE OF COMMITTEE Candidate Committee: | | | | | |
| (a) This committee is a principal campaign committee. (Complete the | candidate information below.) | | | | |
| (b) This committee is an authorized committee, and is NOT a princip information below.) | , | | | | |
| Name of Candidate | | | | | |
| Candidate Office Party Affiliation Sought: House | Senate President District | | | | |
| (c) This committee supports/opposes only one candidate, and is NO | T an authorized committee. | | | | |
| Name of Candidate | | | | | |
| Party Committee: | | | | | |
| (d) X This committee is a (National, State or subordinate) committee | (Democratic, Republican, etc.) Party. | | | | |
| Political Action Committee (PAC): | | | | | |
| (e) This committee is a separate segregated fund. (Identify connected | d organization on line 6.) Its connected organization is a | | | | |
| Corporation Corporation w/ | o Capital Stock Labor Organization | | | | |
| Membership Organization Trade Associat | tion Cooperative | | | | |
| In addition, this committee is a Lobbyist/Registrant F | | | | | |
| (f) This committee supports/opposes more than one Federal candida committee. (i.e., nonconnected committee) | ate, and is NOT a separate segregated fund or party | | | | |
| In addition, this committee is a Lobbyist/Registrant PAC. | | | | | |
| In addition, this committee is a Leadership PAC. (Identify sp | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | | | | |
| Joint Fundraising Representative: | | | | | |
| (g) This committee collects contributions, pays fundraising expenses an committees/organizations, at least one of which is an authorized cor | | | | | |
| (h) This committee collects contributions, pays fundraising expenses an committees/organizations, none of which is an authorized committee | d disburses net proceeds for two or more political | | | | |
| Committees Participating in Joint Fundraiser | | | | | |
| 1. | FEC ID number | | | | |
| 2. | FEC ID number | | | | |
| 3. | FEC ID number | | | | |
| 4 | FEC ID number C | | | | |

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|---|--|---------------------------------|-----------------------------------|
| Write or Type Committee Name | | . – . | |
| LIBERTARIAN | PARTY OF COLOR | ADO | |
| 6. Name of Any Connected C | Organization, Affiliated Committee, Join | nt Fundraising Representative | , or Leadership PAC Sponsor |
| GARY JOHNSON VIC | TORY FUND | | |
| | | | |
| Mailing Address | 107 S WEST ST | | |
| g | STE 922 | | |
| | ALEXANDRIA | VA | 22314 |
| | CITY | STATE | ZIP CODE |
| Relationship: Connected | d Organization Affiliated Committee | X Joint Fundraising Represent | ative Leadership PAC Sponsor |
| Custodian of Records: Ider books and records. | ntify by name, address (phone number | optional) and position of the p | person in possession of committee |
| Michael T | Spalding | | |
| Full Name | ,18 Buckthorn Dr | | |
| Mailing Address | | | |
| | | | |
| | Littleton | CO | 80127 |
| Title or Position | CITY | STATE | ZIP CODE |
| Records Director | | Telephone number | 303 - 904 - 9174 |
| 8. Treasurer: List the name and any designated agent (e.g., a | d address (phone number optional) of assistant treasurer). | the treasurer of the committee | ; and the name and address of |
| Full Name John C Hje | ersman | | 1 |
| of Treasurer | (2220 Oriela Ave | | |
| Mailing Address | 2320 Oriole Ave | | |
| | | | |
| | Colorado Springs | CO | 80909 |
| Title or Position | CITY | STATE | ZIP CODE |
| Treasurer | | Telephone number | 719 - 330 - 6684 |

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|---|--|-------------------|---------------|--|--|
| | | | | | |
| Full Name of Designated Agent Jay R No | rth | | | | |
| Mailing Address | 8115 Sun Country Dr | | | | |
| | Elizabeth | CO 80107 STATE | ZIP CODE | | |
| Title or Position Chair | Telephone n | umber 720 | 440 | | |
| Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. | | | | | |
| BBVA | Compass Bank | | | | |
| Mailing Address | 800 Broadway | | | | |
| | Denver | CO 80203 | | | |
| | CITY | STATE | ZIP CODE | | |
| Name of Bank, Depository, etc. | | | | | |
| Acces: | S Natonal Bank 4221 Walney Rd Ste 120 Chantilly | VA 20151 | | | |
| | СІТҮ | STATE | ZIP CODE | | |

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DC FHŽ G7 < 98 I @ 'C F' ± H9 A ± N5 H± C B

Form/Schedule: F1N Transaction ID:

Added Joint Fundraising Representative "Gary Johnson Victory Fund"

Form/Schedule: Transaction ID: